

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090476		2 Total pages filed: 23	
3 COMMITTEE NAME Our Mobility Our Future				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/26/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6020 Austin, TX 78762			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Baylor			
		NICKNAME LAST SUFFIX A. Jo			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1101 Navasota #2 Austin, TX 78702			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX			
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (512) 413-4276			
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED		Month Day Year Month Day Year 09/25/2020 THROUGH 10/24/2020			
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/03/2020 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Our Mobility Our Future		13 Filer ID (Ethics Commission Filers) 00090476	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # ELECTION DATE Month Day Year 11/03/2020	
		DESCRIPTION City of Austin Proposition A	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 164,190.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 371,911.27
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 25,458.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Baylor A. Jo

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
3 of 23

17 COMMITTEE NAME Our Mobility Our Future	18 Filer ID (Ethics Commission Filers) 00090476
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19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 93,190.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 7,000.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 64,000.00
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/> SCHEDULE E: LOANS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 371,911.27
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/8 Rpt: 4/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/12/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauld, Mandy 6 Contributor address; City; State; Zip Code 4502 Spanish Oak Trail Austin, TX 78731	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Jacob Contributor address; City; State; Zip Code 1809 Travis Heights Blvd Austin, TX 78704	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BoardMaps
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beuerlein, Laura Contributor address; City; State; Zip Code 2630 Exposition Blvd Ste G12 Austin, TX 78703	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Heritage Title Company
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Terry Contributor address; City; State; Zip Code 12535 Highway 71 West Austin, TX 78738	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Business & Property Owner		Employer (See Instructions) Self
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canfield, Philip Contributor address; City; State; Zip Code 2218 N Fremont Street Chicago, IL 60614	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ariet Capital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Gregory <hr/> 6 Contributor address; City; State; Zip Code 4301 W William Cannon Dr Bldg E-1, Suite 150 Austin, TX 78709	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real Estate Investor		9 Employer (See Instructions) Christopher Inv. Co.
Date 10/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daywood, Anthony <hr/> Contributor address; City; State; Zip Code 2501 Rock Terrace Dr Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Don <hr/> Contributor address; City; State; Zip Code 3301 Big Bend Drive Austin, TX 78731	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PJS of Texas, Inc.
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fellows, Mary <hr/> Contributor address; City; State; Zip Code 8619 Honeysuckle Trail Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Graphic Design		Employer (See Instructions) Pencraft Graphic Design
Date 10/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Patrick <hr/> Contributor address; City; State; Zip Code 1101 Sprague Ln West Lake Hills, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasgow, William <hr/> 6 Contributor address; City; State; Zip Code 221 W 6th Street Ste 2000 Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Developer		9 Employer (See Instructions) Self-Employed
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Steven <hr/> Contributor address; City; State; Zip Code 4609 Lyons Rd Austin, TX 78702	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Colby <hr/> Contributor address; City; State; Zip Code 15829 Garrison Circle Austin, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Landscaping		Employer (See Instructions) Green Leaf Arbor Care
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Horace <hr/> Contributor address; City; State; Zip Code 1914 West 40th Street Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Self-Employed
Date 10/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mark <hr/> Contributor address; City; State; Zip Code 98 San Jacinto Blvd Unit FSR 2501 Austin, TX 78701	Amount of Contribution (\$) \$30,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/8 Rpt: 7/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/18/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrix, Scott 6 Contributor address; City; State; Zip Code 5610 Bonnell Vista St Austin, TX 78731	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Financial Services		9 Employer (See Instructions) Self-Employed
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hock, Stacy Contributor address; City; State; Zip Code 3331 Westlake Dr Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kay, Robert Contributor address; City; State; Zip Code 1608 Gaston Ave Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Jeanine Contributor address; City; State; Zip Code 6702 Fireoak Drive Austin, TX 78759	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman PC
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael Contributor address; City; State; Zip Code PO Box 146 Austin, TX 78767	Amount of Contribution (\$) \$8,900.00
Principal occupation / Job title (See Instructions) Founder and Retired Publisher		Employer (See Instructions) Texas Monthly

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Michael <hr/> 6 Contributor address; City; State; Zip Code PO Box 146 Austin, TX 78767	7 Amount of Contribution (\$) \$5,810.00
8 Principal occupation / Job title (See Instructions) Founder and Retired Publisher		9 Employer (See Instructions) Texas Monthly
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lored, Eleuterio <hr/> Contributor address; City; State; Zip Code PO Box 140006 Austin, TX 78714	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Richard <hr/> Contributor address; City; State; Zip Code 704 East 45th 1/2 Street Austin, TX 78751	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Lennar
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Lorri <hr/> Contributor address; City; State; Zip Code 917 West Lynn Street Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Michel Gray & Rogers
Date 10/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neeley Jr., Joe <hr/> Contributor address; City; State; Zip Code 2305 Barton Creek Blvd Apt 11 Austin, TX 78735	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, JP <hr/> 6 Contributor address; City; State; Zip Code 809 Cuernavaca Drive North Austin, TX 78733	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) CRE		9 Employer (See Instructions) Thrive, FP
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevratil, Scott <hr/> Contributor address; City; State; Zip Code 11902 Buckingham Road Austin, TX 78759	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) State of Texas
Date 10/18/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes Jr., Sonny <hr/> Contributor address; City; State; Zip Code 6506 Mesa Drive Austin, TX 78731	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/03/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sayers, Scott <hr/> Contributor address; City; State; Zip Code 1800 Nueces Street Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Money Manager		Employer (See Instructions) Scott Sayers Co
Date 10/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherer, Jeff <hr/> Contributor address; City; State; Zip Code 5001 Valley Oak Drive Austin, TX 78731	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Engineering Mgr		Employer (See Instructions) Forcepoint

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paul <hr/> 6 Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd 228 Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Adjunct Professor		9 Employer (See Instructions) Austin Community College
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Terral <hr/> Contributor address; City; State; Zip Code 6304 Cat Mountain Cv Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terreson, David <hr/> Contributor address; City; State; Zip Code 3812 Agape Lane Austin, TX 78735	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Cardiotexas
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trotsuk, Diane <hr/> Contributor address; City; State; Zip Code 1801 Kendra Cv Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accounting Manager		Employer (See Instructions) MicroAssist
Date 10/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Serene <hr/> Contributor address; City; State; Zip Code 210 Lavaca Street 3405 Austin, TX 78701	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welp, Mark <hr/> 6 Contributor address; City; State; Zip Code 7108 Barefoot Cove Austin, TX 78730	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Mitchel <hr/> Contributor address; City; State; Zip Code 1700 Stoneridge Ter Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Self-Employed
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zito, Paul <hr/> Contributor address; City; State; Zip Code 4445 River Garden Trail Austin, TX 78746	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Diana <hr/> Contributor address; City; State; Zip Code 300 Bowie Street 100A Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Investors alliance

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 12/23	
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/24/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John	8 Amount of contribution (\$) \$7,000.00	9 In-kind contribution description Consulting donated in-kind
7 Contributor address; City; State; Zip Code 3839 Bee Cave Road Suite 204 Austin, TX 78746		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) investments		11 Employer (FOR NON-JUDICIAL) (See instructions) John Lewis Company	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/2 Rpt: 13/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/13/2020	5 Corporation / Labor Organization name 1301 Lakeway LLC <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code PO Box 9190 Austin, TX 78766	7 Amount of contribution (\$) \$5,000.00
Date 10/05/2020	Corporation / Labor Organization name Bull Creek Explorer, L.L.C. <hr/> Corporation / Labor Organization address; City; State; Zip Code 1711 Meadowbrook Dr Austin, TX 78703	Amount of contribution (\$) \$1,500.00
Date 10/07/2020	Corporation / Labor Organization name City Lights Austin Apts, LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code PO Box 92709 Austin, TX 78709	Amount of contribution (\$) \$2,500.00
Date 10/22/2020	Corporation / Labor Organization name Crockett Partners, LTD <hr/> Corporation / Labor Organization address; City; State; Zip Code PO Box 2066 Austin, TX 78768	Amount of contribution (\$) \$20,000.00
Date 10/07/2020	Corporation / Labor Organization name Independence Woods, LLC DBA The Shops At Arbor Trails <hr/> Corporation / Labor Organization address; City; State; Zip Code 4301 W William Cannon Dr Building-E1, Ste 150 Austin, TX 78749	Amount of contribution (\$) \$2,500.00
Date 09/30/2020	Corporation / Labor Organization name Juan in a Million 2300, LLC <hr/> Corporation / Labor Organization address; City; State; Zip Code 2300 E Cesar Chavez St Austin, TX 78702	Amount of contribution (\$) \$1,000.00
Date 10/07/2020	Corporation / Labor Organization name Lake Villa, LLC DBA Escarpment Village <hr/> Corporation / Labor Organization address; City; State; Zip Code 4301 W William Cannon Dr Bldg-E1, Suite 150 Austin, TX 78749	Amount of contribution (\$) \$2,500.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/2 Rpt: 14/23
2 FILER NAME Our Mobility Our Future		3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/06/2020	5 Corporation / Labor Organization name Mercedes-Benz of Austin	7 Amount of contribution (\$) \$25,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 6757 Airport Blvd Austin, TX 78752	
Date 10/21/2020	Corporation / Labor Organization name Mutual Mobile	Amount of contribution (\$) \$500.00
	Corporation / Labor Organization address; City; State; Zip Code 211 East 7th Street Floor 2 Austin, TX 78701	
Date 10/07/2020	Corporation / Labor Organization name Northfield Estates, LLC / Catherine Tower, LLC	Amount of contribution (\$) \$2,500.00
	Corporation / Labor Organization address; City; State; Zip Code PO Box 92709 Austin, TX 78709	
Date 10/22/2020	Corporation / Labor Organization name W. Wayne McDonald Investments	Amount of contribution (\$) \$1,000.00
	Corporation / Labor Organization address; City; State; Zip Code 3705 Balones Dr Austin, TX 78731	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/9 Rpt: 15/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/13/2020	5 Payee name Aro Group, LLC	
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 2509 Lazy Oaks Drive Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/08/2020	Payee name Flake, Dalton	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 220 Peppergrass Cove Kyle, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Talent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2020	Payee name GAR Broadcasting, LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 3839 Bee Cave Rd #100 Austin, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 16/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/22/2020	5 Payee name KC Strategies, LLC	
6 Amount (\$) \$40,787.50	7 Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/23/2020	Candidate/Officeholder name Office sought Office held	
Payee name KC Strategies, LLC		
Amount (\$) \$149,756.49	Payee address; City; State; Zip Code 3571 Far West Blvd #196 Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/08/2020	Candidate/Officeholder name Office sought Office held	
Payee name Madden Music		
Amount (\$) \$680.00	Payee address; City; State; Zip Code 10725 Old Lockhart Road Lot A Austin, TX 78747	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Music Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 17/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/01/2020	5 Payee name Moonshot Marketers LLC	
6 Amount (\$) \$5,193.94	7 Payee address; City; State; Zip Code 1230 E 38th And Half St B Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2020	Payee name Moreland Consulting	
Amount (\$) \$7,100.00	Payee address; City; State; Zip Code 5202 Woodmoor Dr Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense October consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2020	Payee name Moreland Consulting	
Amount (\$) \$2,855.28	Payee address; City; State; Zip Code 5202 Woodmoor Dr Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 18/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/09/2020	5 Payee name Moreland Consulting	
6 Amount (\$) \$2,130.63	7 Payee address; City; State; Zip Code 5202 Woodmoor Dr Austin, TX 78721	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2020	Payee name Moreland Consulting	
Amount (\$) \$1,609.95	Payee address; City; State; Zip Code 5202 Woodmoor Dr Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2020	Payee name Moreland Consulting	
Amount (\$) \$3,176.37	Payee address; City; State; Zip Code 5202 Woodmoor Dr Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs & door hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 19/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 09/25/2020	5 Payee name Pinpoint Action, LLC	
6 Amount (\$) \$2,820.20	7 Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$22,452.80	Payee name Pinpoint Action, LLC Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/11/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5,000.00	Payee name Pinpoint Action, LLC Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 20/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/13/2020	5 Payee name Pinpoint Action, LLC	
6 Amount (\$) \$49,999.99	7 Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/18/2020	Candidate/Officeholder name Office sought Office held	
Payee name Pinpoint Action, LLC		
Amount (\$) \$4,999.17	Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2020	Candidate/Officeholder name Office sought Office held	
Payee name Pinpoint Action, LLC		
Amount (\$) \$7,547.23	Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 21/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/19/2020	5 Payee name Pinpoint Action, LLC	
6 Amount (\$) \$12,500.00	7 Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/23/2020	Candidate/Officeholder name Office sought Office held	
Payee name Pinpoint Action, LLC		
Amount (\$) \$9,680.72	Payee address; City; State; Zip Code 280 Wekiva Springs Road Longwood, FL 32779	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/01/2020	Candidate/Officeholder name Office sought Office held	
Payee name The Austin Chronicle		
Amount (\$) \$3,090.00	Payee address; City; State; Zip Code 4000 N Interstate 35 Frontage Rd Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 22/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 10/05/2020	5 Payee name Vera, Bobby	
6 Amount (\$) \$1,650.00	7 Payee address; City; State; Zip Code 130 Niven Path Jarrell, TX 76537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign installation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/12/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$715.00	Payee name Vera, Bobby Payee address; City; State; Zip Code 130 Niven Path Jarrell, TX 76537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign installation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/22/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$4,934.00	Payee name Waterloo Media Payee address; City; State; Zip Code 8309 N Interstate Hwy 35 Austin, TX 78753	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 23/23	2 FILER NAME Our Mobility Our Future	3 Filer ID (Ethics Commission Filers) 00090476
4 Date 09/27/2020	5 Payee name ZimWin Enterprises LLC	
6 Amount (\$) \$433.00	7 Payee address; City; State; Zip Code 13492 Research Blvd #120-141 Austin, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign installation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2020	Payee name ZimWin Enterprises LLC	
Amount (\$) \$1,299.00	Payee address; City; State; Zip Code 13492 Research Blvd #120-141 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign installation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held